COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

Attorney Docket CE10589R/10-182

As	а	bel	W	named	inv	nt	r,	I her	b	ď	clar	that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND AP	PARATUS FOR	MOBILITY IN WI	LAN SYSTEMS	8				
the specification of which is attached he	ereto unless the	following box is cl	necked:					
was filed on	as	United States and was amen	Application N	Number o	or PCT -			
I hereby state that I have reviewed a including the claims, as amended by an	and understand ny amendment r	the contents of t eferred to above.	he above-iden	tified spec	ification,			
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.								
I hereby claim foreign priority benefit application(s) for patent or inventor's application for patent or inventor's cerpriority is claimed.	certificate listed	below and have	also identified	below any	y foreign			
Prior Foreign Application Number(s) Cour		Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
I hereby claim the benefit under Title application(s) listed below.	35, United State	es Code, § 119(e)	of any United	States pro	ovisional			
Application N	Number(s)	Filing Date (MM	/DD/YYYY)		•			
		·						
I hereby claim the benefit under Title listed below and, insofar as the subject the prior United States application in the Code, § 112, I acknowledge the duty to Title 37, Code of Federal Regulations, application and the national or PCT interest.	ct matter of each ne manner provid o disclose inform , § 1.56 which be	of the claims of t ded by the first paration which is ma ecame available b	this application ragraph of Title terial to patenta etween the filir	is not disc 35, Unite ability as d	closed in d States efined in			
U.S. Parent Application or PCT Parent Number		ling Date	Parent Patent Number (if applicable)					
Parent Number (MM/DD/YYYY) (if applicable)								

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number 23400

Dir ct all corr spond nce to: Custom r Numb r 23400

Direct telephone calls to: (703) 707-9110

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Timothy J. Wilson		DATE 11/19/03		
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Same as above				